## A CASE OF GIARDIA INTESTINALIS TREATED WITH STOVARSOL

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Child, male, aet. 2½ years, refused its usual meals on 13th December, 1925. At about 9 p.m. that day he was seized with severe abdominal pains, 'doubling up' of the lower extremities upon the abdomen, and retraction of the head with the passage of twelve stools in twelve hours. At 9 a.m. on the 14th, temperature was 104° F., the abdominal pains were evidently very intense and the child looked very ill. A mild purgative and rectal lavages, etc., were given, and the stools submitted to microscopical examination showed active flagellate forms of Giardia intestinalis. From 9 a.m. to 9 p.m. that day, twenty to twenty-four motions were passed. They were watery and of a bright greenish colour, 'like masses of floating sea moss.' The child was given one-sixth grain emetine subcutaneously, on the 15th another one-sixth grain, and on the 16th and 17th, one-quarter grain each day with rectal lavages, etc.; with only slight improvement, the temperature falling to 101° F. The stools, however, still remained frequent without any evidence of the formation of faeculent matter. On the 18th one grain of stovarsol was given by the mouth, and the emetine stopped. Twenty-four hours later the stools became less frequent and showed signs of becoming formed, the abdominal pains were less severe, the child seemed less distressed and the temperature was normal. One grain of Stovarsol was given on each of the three following days, at the end of which time the motions were faeculent and formed, all pains had disappeared and the temperature continued normal. Examination of the stools, however, still revealed the presence of Giardia. The Stovarsol was then given every other day for six days, at the end of which time examination of the stools, which were then normal, showed no Giardia. The Stovarsol was continued, one grain every third day for fourteen days, and further examination of the stools showed no *Giardia*. The child has since remained quite well.

Dobell states that emetine has no effect whatsoever upon *Giardia intestinalis* or any of the other 'common intestinal flagellates,' nor has methylene blue, as advocated by Castellani. Oral administration of Salvarsan is said to have cured cases in human beings, by Bavant, Carr and Chandler, and in mice and rats, by Rogers, Kofoid, Yakimoff and others, but Dobell finds the evidence for cure in these cases inconclusive. 'It appears probable,' he says, 'from the evidence at present available, that no specific treatment for infection with any species of intestinal flagellates has yet been discovered. When negative examinations are made during or after a course of "specific" treatment, they cannot be regarded as evidence of "cure" unless they extend over a period much longer than any "negative period" which may be observed in any untreated cases.'

In the above case examination of the faeces on 26th January, 1926 (i.e.) twenty-eight days after last 'negative' examination, still showed no *Giardia*.